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Sheet 2

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Substit	ute for form 1449A/PT0)		Complete if Known				
				Application Number	09/681,881			
INF	ORMATION	DI	SCLOSURE	Filing Date	June 20, 2001			
STA	ATEMENT B	Y	APPLICANT	First Named Inventor	Squires			
				Group Art Unit				
	(use as many she	ets as	s necessary)	Examiner Name				
Sheet	1	of	2	Attorney Docket Number	45722-2			

				U.S. PATENT DOCU	JMENTS	
Examiner Initials	Cite No.1	I Number	Coument Kind Code ² (If known)	Name of Patentee or Applicant of Cited Document	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear
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	Cite 1		Office ³	Number ⁴	Kind Code ⁵ (if known)	Applicant of Cited Document	Cited Document MM-DD-YYYY	Passages or Relevant Figures Appear
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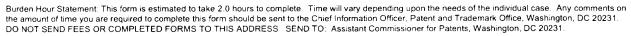
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No.1	Number	Kind Code ²	Name of Patentee or Applicant of Cited Document	Cited Document MM-DD-YYYY	Where Relevant Passages or Relevant Figures Appear
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				FORE	IGN PATENT DOCUMEN	rs		
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U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number 09/681,881 **Application Number TRANSMITTAL** June 20, 2001 Filing Date **FORM First Named Inventor** Squires Group Art Unit (to be used for all correspondence after initial filing) **Examiner Name** 45722-2 160 Attorney Docket Number Total Number of Pages in This Submission (check all that apply) **ENCLOSURES** After Allowance Communication Assignment Papers to Group Fee Transmittal Form (for an Application) Appeal Communication to Board Drawing(s) of Appeals and Interferences Fee Attached Appeal Communication to Group Licensing-related Papers (Appeal Notice, Brief, Reply Brief) Amendment / Reply Petition Proprietary Information After Final Petition to Convert to a Provisional Application Status Letter Affidavits/declaration(s) Power of Attorney, Revocation Change of Correspondence Other Enclosure(s) (please identify below): Extension of Time Request Address Terminal Disclaimer Return Postcard Express Abandonment Request Request for Refund 23 US Patents Information Disclosure Statement CD, Number of CD(s) Certified Copy of Priority Remarks Document(s) NOV 1 5 2001 Response to Missing Parts/ Incomplete Application Response to Missing Parts under 37 CFR 1.52 or 1.53 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT RECEIVED Firm EDWARD YOO 41,435 Individual name 1002 1 2 VGN Signature OFFICE OF PETITIONS Nov 200 Date CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date: Typed or printed name

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